

# Proud To Partner



Naval Health Clinic Great Lakes North Chicago Veterans Medical Center

# North Chicago VAMC

- Established 1926
- Current catchment area: 50,000 veterans
  - 550+ inpatient beds
    - Medical 150 beds ADC of 55 (FY05)
    - Psychiatric 25 beds ADC of 16 (FY05)
    - Long term care 204 beds ADC of 183 (FY05)
    - Domiciliary 186 beds ADC of 141 (FY05)
  - Outpatient visits: FY04=211,933, FY05=214,209 FY



- Gender	:	FY04	FY05	FY06	
male ve	eterans	96.6%	96.4%	96.7%	
female	veterans	3.4%	3.6%	3.9%	
F	Y04	FY05		FY06	
Budget - \$	s126,993,32	29 \$140	,168,561	<b>\$138,43</b>	2,768.
FTEE -	1,199.8	1,14	4.0	1,065.8	

#### Recent construction

- 1.4M square feet distributed over 58 buildings
- Building 133 Constructed 1958 Major renovation: 1996

# Naval Health Clinic Great Lakes

- Naval Hospital established 1911
  - Support Navy Recruit Training
- Current building dedicated December 1960
  - Casualty receiving hospital for Marines and Sailors injured in Vietnam
  - 850 Inpatient beds/450,000 square feet
- Current catchment area: 67,000 beneficiaries.
- Status prior to re-designation 1 June 06
  - 22 Med/Surg/Peds inpatient beds
  - 7 Branch Health Clinics (medical & dental)
  - > 400,000 outpatient visits per year
  - 1,600 employees (active duty and civilian)
  - Annual Budget FY07 \$105M (excludes military personnel expense)
- Redesignated Naval Health Clinic
  - 1 June 2006



#### Initial Collaboration

#### October 2003

- Inpatient Mental Health transferred
- TRICARE Network Provider Status

#### December 2004

• DoD Blood Donor Processing Center transferred

#### Network Hospital Relationship

#### **January 2005:**

- \$13M NCVAMC Project
- Constructed four new Operating Rooms
- Renovated four existing Operating Rooms
- Expanded existing Emergency Department

#### **June 2006**

- Transfer of inpatient med/surg/pediatric wards
- Transfer OR, ER, ICU care
- Reimbursement via

#### Integrated Federal Health Care Facility

#### FY2007

- Navy construction project begins
- Construct parking structure
- Renovate 45,000 square foot existing NCVAMC spaces

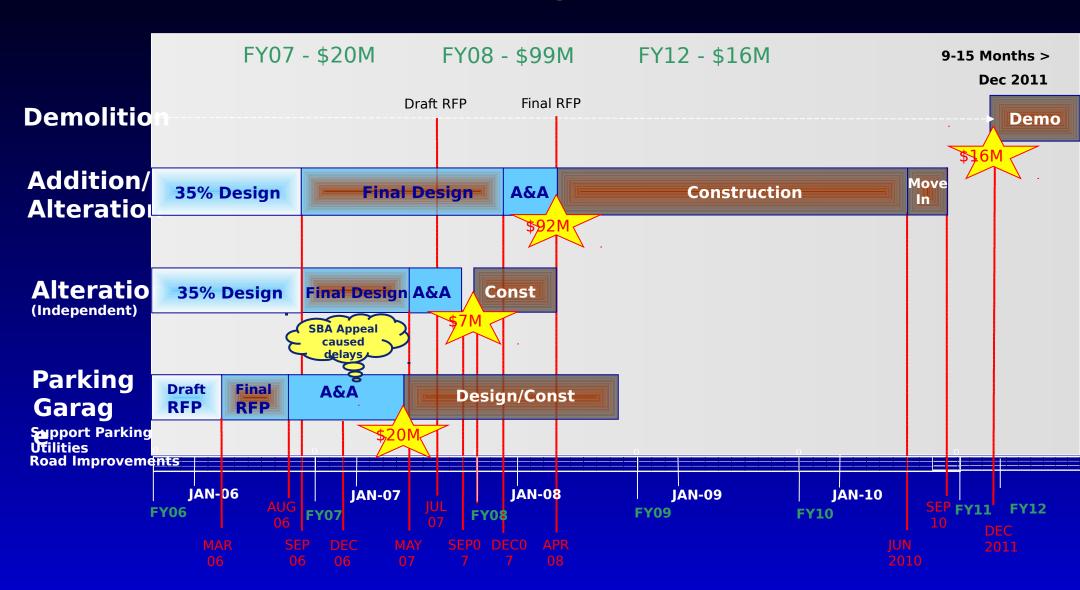
#### FY 2008

• Construct 201,000 square foot ambulatory care center

#### FY 2010

- Construction project completed
- Functional integration of

# Acquisition Strategy & Funding Profile



### Phase I

- MH Inpatient -October 2003
  - ➤ Ward (131-4C) staff by VA personnel
  - ➤ 1.5 FTEE Navy assigned to unit
  - > \$1.5M annual savings Navy Staff
  - > \$500K annual savings to tax payers

	DoD patients served	Bed Days of Care
FY 04 337	2372	
FY 05 466	2182	
FY 06 462	3251	
FY 07 1st QTR	138 1210	

- Blood Processing Center December 2004
  - ✓ \$3.2 million cost avoidance to renovate existing space at Navy
  - ✓ \$900,000 cost avoidance for not building in new FHCF

### Phase II Workload

#### June 1 through Dec 31, 2006

- ER
  - DoD = 8540 visits (40 per day)
  - VA = 4041 visits (20 per day) (10,000<sup>th</sup> DoD visit on Feb 6, at 8pm 8yo girl)
- Surgical Suite Utilization (June 1- Dec 31)
  - DoD = 509 cases
  - -VA = 576 cases
- Inpatient Admissions (June 1- Dec 31)

-	Medicine	CCU	Surgery
- DoD	249	77	44
- VA	632	359	26

### Phase II

- Patient satisfaction
  - NCVAMC ED time one hour less than national average
  - 48-hour call back for all inpatients
  - ED patient call back
  - Decentralized patient advocates all departments
  - NHCGL Patient Admin Dept liaisons 24x7
    - Provides services such as follow-up appt for Active Duty

### First Pediatric Patient



Devontay delivered September 13, 2006 at the North Chicago VAMC Emergency Department



## State-of-the-Art OR Suite



### State-of-the-Art OR Suite



# Joint Incentive Fund Projects

- \$9M in JIF projects
  - Women's Health \$852K
  - Mammography \$470K
  - MRI \$3,426K
  - Oncology \$685K
  - Dedicated fiber optic connectivity \$248K
  - Hospitalist \$403K
  - Digital Radiography (PACS) \$638K
  - Project Management Support \$1,770K

#### Draft Integrated Governance Phase 3



### Proposed Advisory Board

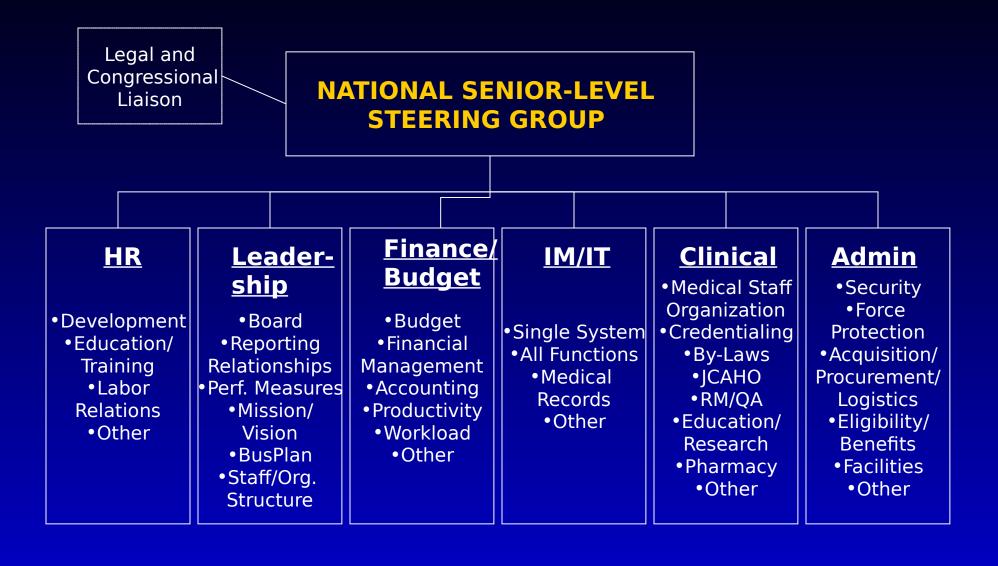
#### > Membership

- Naval Service Training Command
- ► VISN Director
- Navy Medicine East (NME)
- ➤ Veterans Health Affairs (VHA)
- ➤ Navy Bureau of Medicine & Surgery
- > Federal Medical Center Director Ex Officio
- Roles & Responsibilities
  - ➤ Provides input on Director & Deputy Director evaluation
  - Advises on Mission, Vision, & Policy
  - Advises on Strategic Direction
  - ► Advises on Adequate Resources
  - ➤ Monitor Performance

# Stakeholders Advisory Council

- > Membership
  - ► Veterans Service Organizations
  - ► TRICARE Regional Office
  - ► Navy Line Representation
  - Community Representatives
  - ► Rosalind Franklin University Medical School
  - ➤ Other VA/Federal System Directors
  - ► Managed Care Support Contractor
  - ➤ Network/VISN Representatives
  - Congressional Liaison/Representative

### National Task Groups



# reaeral mealth Care Facility (Great Lakes Project) \*Big Rock" Issues • Command and Control (Governance) Model

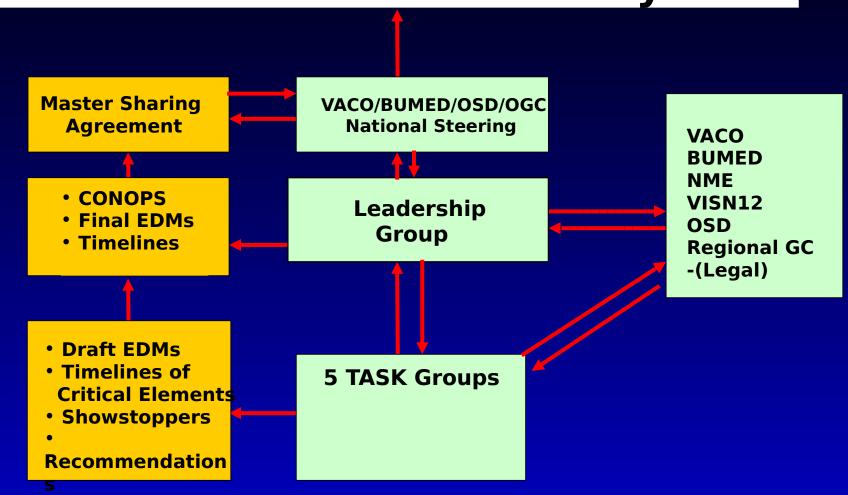
- - Executive Decision Memorandum (EDM)
- Facility designation (MTF, VA, network, combination?)
  - EDM
- Financial Model
  - Budgeting and reimbursement methodology
  - EDM
- Property ownership and investment fund
  - EDM

# Federal Health Care Facility (Great Lakes Project) "Big Rock" Issues (cont.)

- Logistics Model
  - EDM
- Electronic Health Record Model
  - AHLTA vs. VISTA
  - EDM
- Personnel Management Model
  - Civilian Personnel
    - Title 5 vs. Title 38
    - EDM
  - Military personnel
    - Use of IDCs and HMs
    - Adverse events

### Process Flow

Federal Health Care Facility 2010



# Federal Health Care Facility 2010

- Commissioning June 2010
- Projected catchment: 117,000 beneficiaries
  - ~ 400 hospital beds (59 Acute Care)
  - More than 600,000 projected outpatients visits annually
  - $\sim 2500$  employees
    - Staffing model under review
    - FTE savings will occur with integration
  - Annual budget approximately \$240 million



### MASSING STUDY FROM NORTH



### Summary

- Vision: We will create a federal health care center of excellence through world-class patient care, customer service, education and research.
- Progress accomplished to date can be attributed to extensive cooperation at all levels between VA and DoD.
- Phased approach has allowed the adaptation of cultures which has contributed to our success.
- We have been given this opportunity to influence the future of federal health care.
  - The intent is to establish processes which can be exported.

# PROUD TO PARTNER



#### EXCELLENCE IN FEDERAL HEALTH CARE!

North Chicago VA Medical Center Naval Health Clinic Great Lakes